



General Assembly

***Amendment***

***February Session, 2008***

**LCO No. 6024**

**\*HB0570106024HDO\***

Offered by:

REP. SAYERS, 60<sup>th</sup> Dist.

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To: Subst. House Bill No. **5701**

File No. 400

Cal. No. 232

***"AN ACT CONCERNING REVISIONS TO STATUTES PERTAINING  
TO THE DEPARTMENT OF PUBLIC HEALTH."***

1 In line 85, strike "permitting required" and substitute "required  
2 permitting" in lieu thereof

3 In line 461, after "Aging," insert "the Connecticut Assisted Living  
4 Association," and strike "Long Term Care" and substitute "Subacute  
5 Care, Inc." in lieu thereof

6 Strike section 6 in its entirety and renumber the remaining sections  
7 accordingly

8 In line 473, after "records" insert ", provided any such agreement,  
9 lease or other contract may contain a provision that provides a  
10 reasonable protocol for the optometrist to gain access to the premises  
11 during nonbusiness hours for medical emergencies"

12 In line 681, strike "19a-127k,"

13 After the last section, add the following and renumber sections and  
14 internal references accordingly:

15 "Sec. 501. Subsections (b) and (c) of section 20-162bb of the general  
16 statutes are repealed and the following is substituted in lieu thereof  
17 (*Effective from passage*):

18 (b) [Each] Except as provided in subsection (c) of this section, each  
19 person seeking licensure to practice perfusion in this state shall make  
20 application on forms prescribed by the department, pay an application  
21 fee of two hundred fifty dollars and present to the department  
22 satisfactory evidence that such person (1) successfully completed a  
23 perfusion education program with standards established by the  
24 Accreditation Committee for Perfusion Education and approved by the  
25 Commission on Accreditation of Allied Health Education Programs;  
26 (2) completed a minimum of fifty cases after graduating from a  
27 perfusion education program accredited or approved pursuant to  
28 subdivision (1) of this subsection; and (3) after completing the  
29 requirements set forth in subdivision (2) of this subsection,  
30 successfully completed the certification examination offered by the  
31 American Board of Cardiovascular Perfusion, or its successor. The  
32 commissioner shall grant a license as a perfusionist to any applicant  
33 who meets the requirements of this subsection.

34 (c) [From the period beginning October 1, 2005, and ending  
35 December 31, 2006, an applicant for licensure as a perfusionist may, in  
36 lieu of the requirements set forth in subsection (b) of this section,  
37 submit to the department satisfactory evidence that the applicant has  
38 (1) actively engaged in the practice of perfusion in this state since  
39 October 1, 2005, or earlier, and (2) been operating a cardiopulmonary  
40 bypass system during cardiac surgical procedures in a licensed health  
41 care facility as part of the applicant's primary job duties since October  
42 1, 2005.] In lieu of the requirements set forth in subsection (b) of this  
43 section, a person may qualify for a license to practice perfusion in this  
44 state, provided such person: (1) Is currently certified by the American  
45 Board of Cardiovascular Perfusion; (2) has worked as a perfusionist in

46 a licensed healthcare facility in another state for a period of not less  
47 than five years; and (3) has had no lapse in active practice as  
48 perfusionist greater than twenty-four months at the time of filing a  
49 licensure application in Connecticut. The commissioner [shall] may  
50 grant a license as a perfusionist to any applicant who meets the  
51 requirements of this subsection.

52 Sec. 502. (*Effective from passage*) Notwithstanding the provisions of  
53 subsection (a) of section 20-74bb of the 2008 supplement to the general  
54 statutes, during the period commencing on the effective date of this  
55 section and ending thirty days after said effective date, the Department  
56 of Public Health may issue a license to practice as a radiographer  
57 under chapter 376c of the general statutes to an applicant who presents  
58 to the department satisfactory evidence that the applicant: (1) Holds a  
59 current radiologic technician license issued by another state, which  
60 license was initially issued on or before October 1, 1965, and has no  
61 disciplinary history; (2) completed a course of study in radiologic  
62 technology on or before June 30, 1964; and (3) has practiced as a  
63 radiologic technologist including the taking of x-rays for at least  
64 twenty-four months within the five-year period immediately  
65 preceding the date that the applicant filed an application with the  
66 department.

67 Sec. 503. Subsection (c) of section 20-7c of the general statutes is  
68 repealed and the following is substituted in lieu thereof (*Effective*  
69 *October 1, 2008*):

70 (c) Upon a written request of a patient, a patient's attorney or  
71 authorized representative, or pursuant to a written authorization, a  
72 provider, except as provided in section 4-194, shall furnish to the  
73 person making such request a copy of the patient's health record,  
74 including but not limited to, bills, x-rays and copies of laboratory  
75 reports, contact lens specifications based on examinations and final  
76 contact lens fittings given within the preceding three months or such  
77 longer period of time as determined by the provider but no longer  
78 than six months, records of prescriptions and other technical

79 information used in assessing the patient's health condition. No  
80 provider shall charge more than [forty-five] sixty-five cents per page,  
81 including any research fees, handling fees or related costs, and the cost  
82 of first class postage, if applicable, for furnishing a health record  
83 pursuant to this subsection, except such provider may charge a patient  
84 the amount necessary to cover the cost of materials for furnishing a  
85 copy of an x-ray, provided no such charge shall be made for furnishing  
86 a health record or part thereof to a patient, a patient's attorney or  
87 authorized representative if the record or part thereof is necessary for  
88 the purpose of supporting a claim or appeal under any provision of the  
89 Social Security Act and the request is accompanied by documentation  
90 of the claim or appeal. A provider shall furnish a health record  
91 requested pursuant to this section within thirty days of the request.

92 Sec. 504. (*Effective from passage*) Notwithstanding the provisions of  
93 subsection (a) of section 20-206bb of the 2008 supplement to the  
94 general statutes, during the period commencing on the effective date  
95 of this section and ending thirty days after said effective date, the  
96 Department of Public Health may issue a license as an acupuncturist  
97 under chapter 384c of the general statutes to any applicant who  
98 presents satisfactory evidence to the department that the applicant: (1)  
99 Received a Bachelor of Medicine degree prior to 1985; (2) successfully  
100 completed all portions of the acupuncturist examination administered  
101 by the National Commission for the Certification of Acupuncturists;  
102 and (3) successfully completed the Clean Needle Technique Course  
103 offered by the Council of Colleges of Acupuncture and Oriental  
104 Medicine.

105 Sec. 505. Subparagraph (H) of subdivision (7) of subsection (c) of  
106 section 7-148 of the 2008 supplement to the general statutes is repealed  
107 and the following is substituted in lieu thereof (*Effective October 1,*  
108 *2008*):

109 (H) (i) Secure the safety of persons in or passing through the  
110 municipality by regulation of shows, processions, parades and music;

- 111 (ii) Regulate and prohibit the carrying on within the municipality of  
112 any trade, manufacture, business or profession which is, or may be, so  
113 carried on as to become prejudicial to public health, conducive to fraud  
114 and cheating, or dangerous to, or constituting an unreasonable  
115 annoyance to, those living or owning property in the vicinity;
- 116 (iii) Regulate auctions and garage and tag sales;
- 117 (iv) Prohibit, restrain, license and regulate the business of peddlers,  
118 auctioneers and junk dealers in a manner not inconsistent with the  
119 general statutes;
- 120 (v) Regulate and prohibit swimming or bathing in the public or  
121 exposed places within the municipality;
- 122 (vi) Regulate and license the operation of amusement parks and  
123 amusement arcades including, but not limited to, the regulation of  
124 mechanical rides and the establishment of the hours of operation;
- 125 (vii) Prohibit, restrain, license and regulate all sports, exhibitions,  
126 public amusements and performances and all places where games may  
127 be played;
- 128 (viii) Preserve the public peace and good order, prevent and quell  
129 riots and disorderly assemblages and prevent disturbing noises;
- 130 (ix) Establish a system to obtain a more accurate registration of  
131 births, marriages and deaths than the system provided by the general  
132 statutes in a manner not inconsistent with the general statutes;
- 133 (x) Control insect pests or plant diseases in any manner deemed  
134 appropriate;
- 135 (xi) Provide for the health of the inhabitants of the municipality and  
136 do all things necessary or desirable to secure and promote the public  
137 health;
- 138 (xii) Regulate the use of streets, sidewalks, highways, public places

139 and grounds for public and private purposes;

140 (xiii) Make and enforce police, sanitary or other similar regulations  
141 and protect or promote the peace, safety, good government and  
142 welfare of the municipality and its inhabitants;

143 (xiv) Regulate, in addition to the requirements under section 7-282b,  
144 the installation, maintenance and operation of any device or  
145 equipment in a residence or place of business which is capable of  
146 automatically calling and relaying recorded emergency messages to  
147 any state police or municipal police or fire department telephone  
148 number or which is capable of automatically calling and relaying  
149 recorded emergency messages or other forms of emergency signals to  
150 an intermediate third party which shall thereafter call and relay such  
151 emergency messages to a state police or municipal police or fire  
152 department telephone number. Such regulations may provide for  
153 penalties for the transmittal of false alarms by such devices or  
154 equipment;

155 (xv) Make and enforce regulations preventing housing blight,  
156 including regulations reducing assessments, provided such regulations  
157 define housing blight, and including regulations establishing a duty to  
158 maintain property and specifying standards to determine if there is  
159 neglect; prescribe fines for the violation of such regulations of not less  
160 than ten or more than one hundred dollars for each day that a  
161 violation continues and, if such fines are prescribed, such municipality  
162 shall adopt a citation hearing procedure in accordance with section 7-  
163 152c;

164 (xvi) Regulate, on any property owned by the municipality, any  
165 activity deemed to be deleterious to public health, including the  
166 lighting or carrying of a lighted cigarette, cigar, pipe or similar device.

167 Sec. 506. Section 10-292p of the 2008 supplement to the general  
168 statutes is repealed and the following is substituted in lieu thereof  
169 (*Effective from passage*):

170 Any school-based health clinic [constructed on or after October 1,  
171 2007,] that is located in or attached to a school building constructed on  
172 or after October 1, 2007, that shares a first floor exterior wall with the  
173 school building shall [be constructed with] include an entrance that is  
174 separate from the entrance to the school building.

175 Sec. 507. Section 19a-269b of the 2008 supplement to the general  
176 statutes is repealed and the following is substituted in lieu thereof  
177 (*Effective October 1, 2008*):

178 (a) As used in this section, "clinical laboratory" has the same  
179 meaning as provided in section 19a-30. [, "patient" does not include  
180 any person under eighteen years of age and "routine general medical  
181 examination" does not include an annual gynecological examination.]

182 (b) Beginning September 1, 2006:

183 [(1) Each physician licensed under chapter 370 shall order a serum  
184 creatinine test as part of each patient's routine general medical  
185 examination if the patient has not submitted to such test within the  
186 one-year period preceding the routine general medical examination.  
187 The order shall include a notification that the test is being ordered  
188 pursuant to the provisions of this subdivision.

189 (2) For each serum creatinine test performed on a patient admitted  
190 as an inpatient to a hospital licensed in this state, the ordering provider  
191 shall request, at least once during such patient's hospital stay, that the  
192 laboratory performing the test include an estimated glomerular  
193 filtration rate in the laboratory report if the patient has not submitted  
194 to such test within the one-year period preceding such hospitalization.]

195 [(3)] (1) Any person, firm or corporation operating a clinical  
196 laboratory licensed in this state shall ensure that when the clinical  
197 laboratory tests a specimen to determine a patient's serum creatinine  
198 level, as ordered or prescribed by a physician or provider in a hospital,  
199 [pursuant to subdivision (1) or (2) of this subsection,] the clinical  
200 laboratory shall (A) calculate the patient's estimated glomerular

201 filtration rate using the patient's age and gender, which information  
202 shall be provided to the clinical laboratory by the physician or the  
203 provider in a hospital, and (B) include the patient's estimated  
204 glomerular filtration rate with its report to the physician or the  
205 provider in a hospital.

206       [(4)] (2) A person, firm or corporation operating a clinical laboratory  
207 licensed in this state shall be deemed in compliance with subdivision  
208 [(3)] (1) of this subsection if the clinical laboratory makes available to  
209 the ordering physician or provider in a hospital test order codes for  
210 serum creatinine that include eGFR.

211       Sec. 508. Subdivision (3) of subsection (a) of section 20-74ee of the  
212 general statutes is repealed and the following is substituted in lieu  
213 thereof (*Effective from passage*):

214       (3) Nothing in subsection (c) of section 19a-14, sections 20-74aa to  
215 20-74cc, inclusive, and this section shall be construed to require  
216 licensure as a radiographer or to limit the activities of: (A) a dental  
217 assistant as defined in section 20-112a, provided such dental assistant  
218 is engaged in the taking of dental x-rays under the supervision and  
219 control of a dentist licensed pursuant to chapter 379 and can  
220 demonstrate successful completion of the dental radiography portion  
221 of an examination prescribed by the Dental Assisting National Board,  
222 or (B) a dental assistant student, intern or trainee pursuing practical  
223 training in the taking of dental x-rays provided such activities  
224 constitute part of a supervised course or training program and such  
225 person is designated by a title which clearly indicates such person's  
226 status as a student, intern or trainee.

227       Sec. 509. Section 19a-562a of the 2008 supplement to the general  
228 statutes is repealed and the following is substituted in lieu thereof  
229 (*Effective October 1, 2008*):

230       (a) Each Alzheimer's special care unit or program shall annually  
231 provide Alzheimer's and dementia specific training to all licensed and  
232 registered direct care staff and nurse's aides who provide direct patient



233 care to residents enrolled in the Alzheimer's special care unit or  
234 program. Such requirements shall include, but not be limited to, (1) not  
235 less than eight hours of dementia-specific training, which shall be  
236 completed not later than six months after the date of employment and  
237 not less than [three] eight hours of such training annually thereafter,  
238 and (2) annual training of not less than two hours in pain recognition  
239 and administration of pain management techniques for direct care  
240 staff.

241 (b) Each Alzheimer's special care unit or program shall annually  
242 provide a minimum of one hour of Alzheimer's and dementia specific  
243 training to all unlicensed and unregistered staff, except nurse's aides,  
244 who provide services and care to residents enrolled in the Alzheimer's  
245 special care unit or program. For such staff hired on or after October 1,  
246 2007, such training shall be completed not later than six months after  
247 the date of employment.

248 Sec. 510. Section 19a-127k of the general statutes is repealed and the  
249 following is substituted in lieu thereof (*Effective October 1, 2008*):

250 (a) As used in this section:

251 (1) "Community benefits program" means any voluntary program to  
252 promote preventive care and to improve the health status for working  
253 families and populations at risk in the communities within the  
254 geographic service areas of a managed care organization or a hospital  
255 in accordance with guidelines established pursuant to subsection (c) of  
256 this section;

257 (2) "Managed care organization" has the same meaning as provided  
258 in section 38a-478;

259 (3) "Hospital" has the same meaning as provided in section 19a-490  
260 of the 2008 supplement to the general statutes. [; and

261 (4) "Commissioner" means the Commissioner of Public Health.]

262 (b) On or before January 1, 2005, and biennially thereafter, each

263 managed care organization and each hospital shall submit to the  
264 [commissioner, or the commissioner's designee] the Healthcare  
265 Advocate, or the Healthcare Advocate's designee, a report on whether  
266 the managed care organization or hospital has in place a community  
267 benefits program. If a managed care organization or hospital elects to  
268 develop a community benefits program, the report required by this  
269 subsection shall comply with the reporting requirements of subsection  
270 (d) of this section.

271 (c) A managed care organization or hospital may develop  
272 community benefit guidelines intended to promote preventive care  
273 and to improve the health status for working families and populations  
274 at risk, whether or not those individuals are enrollees of the managed  
275 care plan or patients of the hospital. The guidelines shall focus on the  
276 following principles:

277 (1) Adoption and publication of a community benefits policy  
278 statement setting forth the organization's or hospital's commitment to  
279 a formal community benefits program;

280 (2) The responsibility for overseeing the development and  
281 implementation of the community benefits program, the resources to  
282 be allocated and the administrative mechanisms for the regular  
283 evaluation of the program;

284 (3) Seeking assistance and meaningful participation from the  
285 communities within the organization's or hospital's geographic service  
286 areas in developing and implementing the program and in defining  
287 the targeted populations and the specific health care needs it should  
288 address. In doing so, the governing body or management of the  
289 organization or hospital shall give priority to the public health needs  
290 outlined in the most recent version of the state health plan prepared by  
291 the Department of Public Health pursuant to section 19a-7; and

292 (4) Developing its program based upon an assessment of the health  
293 care needs and resources of the targeted populations, particularly low  
294 and middle-income, medically underserved populations and barriers

295 to accessing health care, including, but not limited to, cultural,  
296 linguistic and physical barriers to accessible health care, lack of  
297 information on available sources of health care coverage and services,  
298 and the benefits of preventive health care. The program shall consider  
299 the health care needs of a broad spectrum of age groups and health  
300 conditions.

301 (d) Each managed care organization and each hospital that chooses  
302 to participate in developing a community benefits program shall  
303 include in the biennial report required by subsection (b) of this section  
304 the status of the program, if any, that the organization or hospital  
305 established. If the managed care organization or hospital has chosen to  
306 participate in a community benefits program, the report shall include  
307 the following components: (1) The community benefits policy  
308 statement of the managed care organization or hospital; (2) the  
309 mechanism by which community participation is solicited and  
310 incorporated in the community benefits program; (3) identification of  
311 community health needs that were considered in developing and  
312 implementing the community benefits program; (4) a narrative  
313 description of the community benefits, community services, and  
314 preventive health education provided or proposed, which may include  
315 measurements related to the number of people served and health  
316 status outcomes; (5) measures taken to evaluate the results of the  
317 community benefits program and proposed revisions to the program;  
318 (6) to the extent feasible, a community benefits budget and a good faith  
319 effort to measure expenditures and administrative costs associated  
320 with the community benefits program, including both cash and in-  
321 kind commitments; and (7) a summary of the extent to which the  
322 managed care organization or hospital has developed and met the  
323 guidelines listed in subsection (c) of this section. Each managed care  
324 organization and each hospital shall make a copy of the report  
325 available, upon request, to any member of the public.

326 (e) The [commissioner, or the commissioner's designee] Healthcare  
327 Advocate, or the Healthcare Advocate's designee, shall, within  
328 available appropriations, develop a summary and analysis of the

329 community benefits program reports submitted by managed care  
330 organizations and hospitals under this section and shall review such  
331 reports for adherence to the guidelines set forth in subsection (c) of this  
332 section. Not later than October 1, 2005, and biennially thereafter, the  
333 [commissioner, or the commissioner's designee] Healthcare Advocate,  
334 or the Healthcare Advocate's designee, shall make such summary and  
335 analysis available to the public upon request.

336 (f) The [commissioner] Healthcare Advocate may, after notice and  
337 opportunity for a hearing, in accordance with chapter 54, impose a  
338 civil penalty on any managed care organization or hospital that fails to  
339 submit the report required pursuant to this section by the date  
340 specified in subsection (b) of this section. Such penalty shall be not  
341 more than fifty dollars a day for each day after the required submittal  
342 date that such report is not submitted.

343 Sec. 511. Subsection (h) of section 19a-180 of the 2008 supplement to  
344 the general statutes is repealed and the following is substituted in lieu  
345 thereof (*Effective October 1, 2008*):

346 (h) Notwithstanding the provisions of subsection (a) of this section,  
347 any volunteer, hospital-based or municipal ambulance service that is  
348 licensed or certified and is a primary service area responder may apply  
349 to the commissioner to add one emergency vehicle to its existing fleet  
350 every three years, on a short form application prescribed by the  
351 commissioner. No such volunteer, hospital-based or municipal  
352 ambulance service may add more than one emergency vehicle to its  
353 existing fleet pursuant to this subsection regardless of the number of  
354 municipalities served by such volunteer, hospital-based or municipal  
355 ambulance service. Upon making such application, the applicant shall  
356 notify in writing all other primary service area responders in any  
357 municipality or abutting municipality in which the applicant proposes  
358 to add the additional emergency vehicle. Except in the case where a  
359 primary service area responder entitled to receive notification of such  
360 application objects, in writing, to the commissioner not later than  
361 fifteen calendar days after receiving such notice, the application shall

362 be deemed approved thirty calendar days after filing. If any such  
363 primary service area responder files an objection with the  
364 commissioner within the fifteen-calendar-day time period and requests  
365 a hearing, the applicant shall be required to demonstrate need at a  
366 public hearing as required under subsection (a) of this section.

367 Sec. 512. Section 20-188 of the general statutes is repealed and the  
368 following is substituted in lieu thereof (*Effective October 1, 2008*):

369 Before granting a license to a psychologist, the department shall,  
370 except as provided in section 20-190, require any applicant therefor to  
371 pass an examination in psychology [to be given at such time and place  
372 as the department prescribes. Examinations shall be] prescribed by the  
373 department [,] with the advice and consent of the board. [, and shall be  
374 administered to applicants by the Department of Public Health under  
375 the supervision of the board.] Each applicant shall pay a fee of four  
376 hundred fifty dollars, and shall satisfy the department that [he] such  
377 applicant (1) has received the doctoral degree based on a program of  
378 studies whose content was primarily psychological from an  
379 educational institution [registered as provided in] approved in  
380 accordance with section 20-189; and (2) has had at least one year's  
381 [postdoctoral] experience [of a type satisfactory to the board. Such  
382 applicant shall further verify that he intends in good faith to practice  
383 psychology in this state] that meets the requirements established in  
384 regulations adopted by the department, in consultation with the board,  
385 in accordance with the provisions of chapter 54. The department shall  
386 establish a passing score with the consent of the board. [The  
387 Department of Public Health shall grade the examinations returned by  
388 the candidates. Any unsuccessful candidate may, upon written request  
389 to the department, see his graded paper.] Any certificate granted by  
390 the board of examiners prior to June 24, 1969, shall be deemed a valid  
391 license permitting continuance of profession subject to the provisions  
392 of this chapter.

393 Sec. 513. Subsection (a) of section 20-195 of the general statutes is  
394 repealed and the following is substituted in lieu thereof (*Effective*

395    October 1, 2008):

396       (a) Nothing in this chapter shall be construed to limit the activities  
397    and services of a graduate student, intern or resident in psychology,  
398    pursuing a course of study in an educational institution [registered]  
399    under the provisions of section 20-189, if such activities constitute a  
400    part of a supervised course of study. No license as a psychologist shall  
401    be required of a person holding a doctoral degree based on a program  
402    of studies whose content was primarily psychological from an  
403    educational institution approved under the provisions of section 20-  
404    189, provided such activities and services are necessary to satisfy the  
405    [postdoctoral] work experience as required by section 20-188, as  
406    amended by this act. The provisions of this chapter shall not apply to  
407    any person in the salaried employ of any person, firm, corporation,  
408    educational institution or governmental agency when acting within the  
409    person's own organization. Nothing in this chapter shall be construed  
410    to prevent the giving of accurate information concerning education  
411    and experience by any person in any application for employment.  
412    Nothing in this chapter shall be construed to prevent physicians,  
413    optometrists, chiropractors, members of the clergy, attorneys-at-law or  
414    social workers from doing work of a psychological nature consistent  
415    with accepted standards in their respective professions.

416       Sec. 514. Section 38a-479aa of the 2008 supplement to the general  
417    statutes is amended by adding subsection (n) as follows (*Effective from*  
418    *passage*):

419       (NEW) (n) The requirements of subsections (h) and (i) of this section  
420    shall not apply to a consortium of federally qualified health centers  
421    funded by the state, providing services only to recipients of programs  
422    administered by the Department of Social Services. The Commissioner  
423    of Social Services shall adopt regulations, in accordance with chapter  
424    54, to establish criteria to certify any such federally qualified health  
425    center, including, but not limited to, minimum reserve fund  
426    requirements.

427 Sec. 515. Section 10a-155 of the general statutes is repealed and the  
428 following is substituted in lieu thereof (*Effective October 1, 2008*):

429 (a) Each institution of higher education shall require each full-time  
430 or matriculating student born after December 31, 1956, to provide  
431 proof of adequate immunization against measles, [and] rubella and on  
432 and after August 1, 2010, to provide proof of adequate immunization  
433 against mumps and varicella as recommended by the national  
434 Advisory Committee for Immunization Practices before permitting  
435 such student to enroll in such institution. Any such student who (1)  
436 presents a certificate from a physician stating that in the opinion of  
437 such physician such immunization is medically contraindicated, (2)  
438 provides a statement that such immunization would be contrary to his  
439 religious beliefs, (3) presents a certificate from a physician, or from the  
440 director of health in the student's present or previous town of  
441 residence, stating that the student has had a confirmed case of such  
442 disease, (4) is enrolled exclusively in a program for which students do  
443 not congregate on campus for classes or to participate in institutional-  
444 sponsored events, such as students enrolled in distance learning  
445 programs for individualized home study or programs conducted  
446 entirely through electronic media in a setting without other students  
447 present, or (5) graduated from a public or nonpublic high school in this  
448 state in 1999 or later and was not exempt from the measles, [and]  
449 rubella and on and after August 1, 2010, the mumps vaccination  
450 requirement pursuant to subdivision (2) or (3) of subsection (a) of  
451 section 10-204a shall be exempt from the appropriate provisions of this  
452 section.

453 (b) Each institution of higher education shall keep uniform records  
454 of the immunizations and immunization status of each student, based  
455 on the certificate of immunization or other evidence acceptable  
456 pursuant to subsection (a) of this section. The record shall be part of  
457 the student's permanent record. By November first of each year, the  
458 chief administrative officer of each institution of higher education shall  
459 cause to be submitted to the Commissioner of Public Health, on a form  
460 provided by the commissioner, a summary report of the immunization

461 status of all students enrolling in such institution.

462 Sec. 516. Section 19a-437 of the general statutes is repealed and the  
463 following is substituted in lieu thereof (*Effective October 1, 2008*):

464 Before [he may be issued] the issuance of a license in accordance  
465 with the provisions of this chapter, the applicant shall first:

466 (1) Determine the maximum number of people which will be  
467 assembled or admitted to the location of the assembly, provided the  
468 maximum number shall not exceed the maximum number which can  
469 reasonably assemble at the location of the assembly in consideration of  
470 the nature of the assembly and provided, where the assembly is to  
471 continue overnight, the maximum number shall not be more than is  
472 allowed to sleep within the boundaries of the location of the assembly  
473 by the zoning or health ordinances of the municipality;

474 (2) Provide proof that food concessions will be in operation on the  
475 grounds with sufficient capacity to accommodate the number of  
476 persons expected to be in attendance and that he will furnish at his  
477 own expense before the assembly commences: (A) Potable water,  
478 meeting all federal and state requirements for purity, sufficient to  
479 provide drinking water for the maximum number of people to be  
480 assembled at the rate of at least one gallon per person per day and  
481 water for bathing at the rate of at least ten gallons per person per day;  
482 (B) separate enclosed toilets for males and females, meeting all state  
483 and local specifications, conveniently located throughout the grounds,  
484 sufficient to provide facilities for the maximum number of people to be  
485 assembled at the rate of at least one toilet for every two hundred  
486 females and at least one toilet for every three hundred males, together  
487 with an efficient, sanitary means of disposing of waste matter  
488 deposited, which is in compliance with all state and local laws and  
489 regulations. A lavatory with running water under pressure and a  
490 continuous supply of soap and paper towels shall be provided with  
491 each toilet; (C) a sanitary method of disposing of solid waste, in  
492 compliance with state and local laws and regulations, sufficient to



493 dispose of the solid waste production of the maximum number of  
494 people to be assembled at the rate of at least two and one-half pounds  
495 of solid waste per person per day, together with a plan for holding and  
496 a plan for collecting all such waste at least once each day of the  
497 assembly and sufficient trash cans with tight fitting lids and personnel  
498 to perform the task; (D) [physicians and nurses licensed to practice in  
499 this state at the rate of at least one physician for every one thousand  
500 people and at least one nurse for every fifteen hundred people  
501 anticipated to be assembled, together with an enclosed covered  
502 structure where treatment may be rendered, containing a separately  
503 enclosed treatment room for each physician, and at least one  
504 emergency ambulance available for use at all times] a written plan  
505 reviewed by the primary service area responder, as defined in section  
506 19a-175, in the location where the assembly is to be held, that indicates  
507 that the applicant has satisfactorily planned and arranged for the on-  
508 site availability of an emergency medical service organization, as  
509 defined in section 19a-175, during the duration of the assembly; (E) if  
510 the assembly is to continue during hours of darkness, illumination  
511 sufficient to light the entire area of the assembly at the rate of at least  
512 five foot candles, but not to shine unreasonably beyond the boundaries  
513 of the location of the assembly; (F) a free parking area inside of the  
514 assembly grounds sufficient to provide parking space for the  
515 maximum number of people to be assembled at the rate of at least one  
516 parking space for every four persons; (G) telephones connected to  
517 outside lines sufficient to provide service for the maximum number of  
518 people to be assembled at the rate of at least one separate line and  
519 receiver for each one thousand persons; (H) if the assembly is to  
520 continue overnight, camping facilities in compliance with all state and  
521 local requirements, sufficient to provide camping accommodations for  
522 the maximum number of people to be assembled; (I) security guards,  
523 either regularly employed, duly sworn, off duty policemen or  
524 constables or private guards, licensed in this state, sufficient to provide  
525 adequate security for the maximum number of people to be assembled  
526 at the rate of at least one security guard for every seven hundred fifty  
527 people; (J) fire protection, including alarms, extinguishing devices and

528 fire lanes and escapes, sufficient to meet all state and local standards  
529 for the location of the assembly and sufficient emergency personnel to  
530 operate efficiently the required equipment; (K) all reasonably  
531 necessary precautions to insure that the sound of the assembly will not  
532 carry unreasonably beyond the enclosed boundaries of the location of  
533 the assembly; and (L) a bond, filed with the clerk of the municipality in  
534 which the assembly is to gather, either in cash or underwritten by a  
535 surety company licensed to do business in this state at the rate of four  
536 dollars per person for the maximum number of people permitted to  
537 assemble, which (i) shall indemnify and hold harmless the  
538 municipality or any of its agents, officers, servants or employees from  
539 any liability or causes of action which might arise by reason of  
540 granting the license, and from any cost incurred in cleaning up any  
541 waste material produced or left by the assembly; (ii) guarantee the  
542 state the payment of any taxes which may accrue as a result of the  
543 gathering; and (iii) guarantee reimbursement of ticketholders if the  
544 event is cancelled.

545 Sec. 517. Section 7-48 of the general statutes, as amended by  
546 substitute house bill 5808 of the current session, is repealed and the  
547 following is substituted in lieu thereof (*Effective October 1, 2008*):

548 (a) Not later than ten days after each live birth which occurs in this  
549 state, a birth certificate shall be filed with the registrar of vital statistics  
550 in the town in which the birth occurred and the certificate shall be  
551 registered if properly filed, by manual or electronic systems as  
552 prescribed by the commissioner. On and after January 1, 1994, each  
553 hospital with two hundred or more live births in calendar year 1990, or  
554 any subsequent calendar year, shall electronically transmit birth  
555 information data to the department in a computer format approved by  
556 the department. Each birth certificate shall contain such information as  
557 the department may require and shall be completed in its entirety.  
558 [The Social Security number of the mother and father] Medical and  
559 health information which is required by the department, including  
560 information regarding voluntary acknowledgments of paternity and  
561 whether the child was born out of wedlock, shall be recorded on a

562 confidential portion of the certificate to be sent directly to the  
563 department. Such confidential records may be used for statistical and  
564 health purposes by the department or by a local director of health, as  
565 authorized by the department, for records related to the town served  
566 by the local director of health and where the mother was a resident at  
567 the time of the birth of the child. Such birth certificate and confidential  
568 records may be used internally by the hospital for records transmitted  
569 by the hospital for statistical, health and quality assurance purposes.  
570 The department shall give due consideration to national uniformity in  
571 vital statistics in prescribing the format and content of such certificate.

572 (b) When a birth occurs in an institution or en route thereto, the  
573 person in charge of the institution or such person's designated  
574 representative shall obtain all available data required by the certificate,  
575 prepare the certificate, certify that the child was born alive at the place  
576 and time and on the date stated either by signature or by an electronic  
577 process approved by the commissioner and file the certificate with the  
578 registrar of vital statistics in the town in which the birth occurred, not  
579 later than ten days after such birth. The physician or other person in  
580 attendance, and the physician, institution or other person providing  
581 prenatal care, shall provide the medical information required by the  
582 certificate not later than seventy-two hours after the birth.

583 (c) When a birth occurs outside an institution, the certificate shall be  
584 prepared and filed by the physician or midwife in attendance at or  
585 immediately after the birth or, in the absence of such a person, by the  
586 father or mother.

587 (d) When a birth occurs in a moving conveyance and the child is  
588 first removed from the conveyance in this state, the birth shall be  
589 registered in this state and the place where the child is first removed  
590 shall be considered the place of birth.

591 Sec. 518. Section 7-51 of the general statutes, as amended by  
592 substitute house bill 5808 of the current session, is repealed and the  
593 following is substituted in lieu thereof (*Effective October 1, 2008*):

594 (a) The department and registrars of vital records shall restrict  
595 access to and issuance of a certified copy of birth and fetal death  
596 records and certificates less than one hundred years old, to the  
597 following eligible parties: (1) The person whose birth is recorded, if  
598 over eighteen years of age; (2) such person's children, grandchildren,  
599 spouse, parent, guardian or grandparent; (3) the chief executive officer  
600 of the municipality where the birth or fetal death occurred, or the chief  
601 executive officer's authorized agent; (4) the local director of health for  
602 the town or city where the birth or fetal death occurred or where the  
603 mother was a resident at the time of the birth or fetal death, or the  
604 director's authorized agent; (5) attorneys-at-law and title examiners  
605 representing such person or such person's parent, guardian, child or  
606 surviving spouse; (6) members of genealogical societies incorporated  
607 or authorized by the Secretary of the State to do business or conduct  
608 affairs in this state; (7) agents of a state or federal agency as approved  
609 by the department; and (8) researchers approved by the department  
610 pursuant to section 19a-25. Except as provided in section 19a-42a,  
611 access to confidential files on paternity, adoption, gender change or  
612 gestational agreements, or information contained within such files,  
613 shall not be released to any party, including the eligible parties listed  
614 in this subsection, except upon an order of a court of competent  
615 jurisdiction.

616 (b) No person other than the eligible parties listed in subsection (a)  
617 of this section shall be entitled to examine or receive a copy of any  
618 birth or fetal death record or certificate, ~~[record or]~~ access the  
619 information contained therein, or disclose any matter contained  
620 therein, except upon written order of a court of competent jurisdiction.  
621 Nothing in this section shall be construed to permit disclosure to any  
622 person, including the eligible parties listed in subsection (a) of this  
623 section, of [(1) Social Security numbers, (2)] information contained in  
624 the "information for [medical and] health and statistical use only"  
625 section [of a birth certificate,] or [(3)] the ["information for statistical"]  
626 "administrative purposes only" section of a birth certificate, [other than  
627 the race and ethnicity information of the parent or parents recorded in

628 the "administrative purposes" section of an electronically filed birth or  
629 fetal death certificate or displayed on a manually filed birth or fetal  
630 death certificate,] unless specifically authorized by [state or federal law  
631 or by] the department for statistical or research purposes. The Social  
632 Security number of the parent or parents listed on any birth certificate  
633 shall not be released to any party, except to those persons or entities  
634 authorized by state or federal law. Such confidential information, other  
635 than the excluded information set forth in this subsection, shall not be  
636 subject to subpoena or court order and shall not be admissible before  
637 any court or other tribunal.

638 (c) The registrar of the town in which the birth or fetal death  
639 occurred or of the town in which the mother resided at the time of the  
640 birth or fetal death, or the department, may issue a certified copy of the  
641 certificate of birth or fetal death of any person born in this state which  
642 is kept in paper form in the custody of the registrar. Such certificate  
643 shall be issued upon the written request of an eligible party listed in  
644 subsection (a) of this section. Any registrar of vital statistics in this  
645 state with access, as authorized by the department, to the electronic  
646 vital records system of the department may issue a certified copy of  
647 the electronically filed certificate of birth or fetal death of any person  
648 born in this state upon the written request of an eligible party listed in  
649 subsection (a) of this section.

650 (d) The department and each registrar of vital statistics shall issue  
651 only certified copies of birth certificates or fetal death certificates for  
652 births or fetal deaths occurring less than one hundred years prior to  
653 the date of the request.

654 Sec. 519. Subsection (a) of section 7-50, as amended by substitute  
655 house bill 5808 of the current session, of the general statutes is repealed  
656 and the following is substituted in lieu thereof (*Effective October 1,*  
657 *2008*):

658 (a) No certificate of birth shall contain any specific statement that  
659 the child was born in or out of wedlock or reference to illegitimacy of

660 the child or to the marital status of the mother, except that information  
661 on whether the child was born in or out of wedlock and the marital  
662 status of the mother shall be recorded on a confidential portion of the  
663 certificate pursuant to section 7-48, as amended by this act. Upon the  
664 completion of an acknowledgment of paternity at a hospital,  
665 concurrent with the hospital's electronic transmission of birth data to  
666 the department, or at a town in the case of a home birth, concurrent  
667 with the registration of the birth data by the town, the  
668 acknowledgment shall be filed in the paternity registry maintained by  
669 the department, as required by section 19a-42a, and the name of the  
670 father of a child born out of wedlock shall be entered in or upon the  
671 birth certificate or birth record of such child. All properly completed  
672 post birth acknowledgments or certified adjudications of paternity  
673 received by the department shall be filed in the paternity registry  
674 maintained by the department, and the name of the father of the child  
675 born out of wedlock shall be entered in or upon the birth record or  
676 certificate of such child by the department, if there is no paternity  
677 already recorded on the birth certificate. If another father's information  
678 is recorded on the certificate, the original father's information shall not  
679 be removed except upon receipt by the department of a certified order  
680 by a court of competent jurisdiction in which there is a finding that the  
681 individual recorded on the birth certificate, specifically referenced by  
682 name, is not the child's father, or a finding that a different individual  
683 than the one recorded, specifically referenced by name, is the child's  
684 father. The name of the father on a birth certificate or birth record shall  
685 otherwise be removed or changed only upon the filing of a rescission  
686 in such registry, as provided in section 19a-42a. The Social Security  
687 number of the father of a child born out of wedlock may be entered in  
688 or upon the birth certificate or birth record of such child if such entry is  
689 done in accordance with [section 7-48, and] 5 USC 552a note.

690 Sec. 520. Section 7-51a of the general statutes, as amended by  
691 substitute house bill 5808 of the current session, is repealed and the  
692 following is substituted in lieu thereof (*Effective October 1, 2008*):

693 (a) Any person eighteen years of age or older may purchase certified

694 copies of marriage and death records, and certified copies of records of  
695 births or fetal deaths which are at least one hundred years old, in the  
696 custody of any registrar of vital statistics. The department may issue  
697 uncertified copies of death certificates for deaths occurring less than  
698 one hundred years ago, and uncertified copies of birth, marriage,  
699 death and fetal death certificates for births, marriages, deaths and fetal  
700 deaths that occurred at least one hundred years ago, to researchers  
701 approved by the department pursuant to section 19a-25, and to state  
702 and federal agencies approved by the department. During all normal  
703 business hours, members of genealogical societies incorporated or  
704 authorized by the Secretary of the State to do business or conduct  
705 affairs in this state shall (1) have full access to all vital records in the  
706 custody of any registrar of vital statistics, including certificates,  
707 ledgers, record books, card files, indexes and database printouts,  
708 except for those records containing Social Security numbers protected  
709 pursuant to 42 USC 405 (c)(2)(C), and confidential files on adoptions,  
710 gender change, gestational agreements and paternity, (2) be permitted  
711 to make notes from such records, (3) be permitted to purchase certified  
712 copies of such records, and (4) be permitted to incorporate statistics  
713 derived from such records in the publications of such genealogical  
714 societies. For all vital records containing Social Security numbers that  
715 are protected from disclosure pursuant to federal law, the Social  
716 Security numbers contained on such records shall be redacted from  
717 any certified copy of such records issued to a genealogist by a registrar  
718 of vital statistics.

719 (b) For marriage and civil union licenses, the Social Security  
720 numbers of the parties to the marriage or civil union shall be recorded  
721 in the "administrative purposes" section of the marriage or civil union  
722 license and the application for such license. All persons specified on  
723 the license, including the parties to the marriage or civil union,  
724 officiator and local registrar shall have access to the Social Security  
725 numbers specified on the marriage or civil union license and the  
726 application for such license for the purpose of processing the license.  
727 Only the parties to a marriage or civil union, or entities authorized by

728 state or federal law, may receive a certified copy of a marriage or civil  
729 union license with the Social Security numbers included on the license.  
730 Any other individual, researcher or state or federal agency requesting  
731 a certified or uncertified copy of any marriage or civil union license in  
732 accordance with the provisions of this section shall be provided such  
733 copy with such Social Security numbers removed or redacted, or with  
734 the "administrative purposes" section omitted.

735 (c) For deaths occurring after December 31, 2001, the Social Security  
736 number, occupation, business or industry, race, Hispanic origin if  
737 applicable, and educational level of the deceased person, if known,  
738 shall be recorded in the "administrative purposes" section of the death  
739 certificate. All parties specified on the certificate, including the  
740 informant, licensed funeral director, licensed embalmer, conservator,  
741 surviving spouse, physician and town clerk, shall have access to the  
742 Social Security numbers of the decedent as well as other information  
743 contained in the "administrative purposes" section specified on the  
744 original death certificate for the purpose of processing the certificate.  
745 For any death occurring after July 1, 1997, only the surviving spouse,  
746 [or] next of kin or state and federal agencies authorized by federal law  
747 may receive a certified copy of a death certificate with the decedent's  
748 Social Security number or the complete "administrative purposes"  
749 section included on the certificate. Any researcher requesting a death  
750 certificate for a death occurring after July 1, 1997, may obtain the  
751 information included in the "administrative purposes" section of such  
752 certificate, except that the decedent's Social Security number shall be  
753 redacted.

754 (d) The registrar of vital statistics of any town or city in this state  
755 that has access to an electronic vital records system, as authorized by  
756 the department, may use such system to issue certified copies of birth,  
757 death, fetal death or marriage certificates that are electronically filed in  
758 such system.

759 Sec. 521. Subsection (g) of section 19a-88 of the 2008 supplement to  
760 the general statutes is repealed and the following is substituted in lieu



761 thereof (*Effective July 1, 2008*):

762 (g) On or before July 1, 2008, the Department of Public Health shall  
763 establish and implement a secure on-line license renewal system for  
764 persons holding a license to practice medicine or surgery under  
765 chapter 370, dentistry under chapter 379 or nursing under chapter 378.  
766 The department shall allow any such person who renews his or her  
767 license using the on-line license renewal system to pay his or her  
768 professional service fees on-line by means of a credit card or electronic  
769 transfer of funds from a bank or credit union account and may charge  
770 such person a service fee not to exceed five dollars for any such on-line  
771 payment made by credit card or electronic funds transfer. On or before  
772 January 1, 2009, the department shall submit, in accordance with  
773 section 11-4a, a report on the feasibility and implications of the  
774 implementation of a biennial license renewal system for persons  
775 holding a license to practice nursing under chapter 378 to the joint  
776 standing committee of the General Assembly having cognizance of  
777 matters relating to public health.

778 Sec. 522. (*Effective from passage*) The Department of Public Health, in  
779 consultation with the Departments of Environmental Protection and  
780 Consumer Protection, shall convene a working group of individuals to  
781 study and make legislative recommendations to ensure that property  
782 owners of new construction, with a private water supply well that  
783 serves as the source of drinking water are assured of an adequate  
784 supply of water that meets current standards for potability as defined  
785 in the regulations of Connecticut state agencies. The working group  
786 shall also study and make recommendations concerning the  
787 installation of replacement water supply wells on properties where  
788 there is insufficient area to meet the current separation distances as  
789 specified in the regulations of Connecticut state agencies. The working  
790 group shall consist of: (1) The Commissioner of Public Health, or the  
791 commissioner's designee or designees; (2) the Commissioner of  
792 Environmental Protection, or the commissioner's designee or  
793 designees; (3) the Commissioner of Consumer Protection, or the  
794 commissioner's designee or designees; and (4) various interested

795 stakeholders who have expressed to the Department of Public Health a  
796 willingness to work with the department on such issues. Not later than  
797 July 1, 2009, the working group shall report, in accordance with section  
798 11-4a of the general statutes, its legislative recommendations to the  
799 joint standing committees of the General Assembly having cognizance  
800 of matters relating public health, environment and consumer  
801 protection.

802 Sec. 523. Section 17b-288 of the general statutes is repealed and the  
803 following is substituted in lieu thereof (*Effective July 1, 2008*):

804 (a) There is established an organ transplant account which shall be a  
805 separate, nonlapsing account within the General Fund. Any moneys  
806 collected under the contribution system established under section 12-  
807 743 shall be deposited by the Commissioner of Revenue Services into  
808 the account. This account may also receive moneys from public and  
809 private sources or from the federal government. All moneys deposited  
810 in the account shall be used by the Department of Social Services or  
811 persons acting under a contract with the department, (1) to assist  
812 residents of the state in paying all or part of any costs associated with a  
813 medically required organ transplant, [or] (2) to assist individuals who  
814 have donated an organ to a resident of the state in paying all or part of  
815 any costs associated with the organ donation, including, but not  
816 limited to, costs of transportation, accommodation and lost wages, or  
817 (3) the promotion of the income tax contribution system and the organ  
818 transplant account. Expenditures from the account in any fiscal year  
819 for the promotion of the contribution system or the account shall not  
820 exceed ten per cent of the amount of moneys raised during the  
821 previous fiscal year provided such limitation shall not apply to an  
822 expenditure of not more than fifteen thousand dollars from the  
823 account on or before July 1, 1994, to reimburse expenditures made on  
824 or before said date, with prior written authorization of the  
825 Commissioner of Public Health, by private organizations to promote  
826 the contribution system and the organ transplant account.

827 (b) The Commissioner of Social Services shall adopt regulations, in

828 accordance with the provisions of chapter 54, to provide for the  
829 distribution of funds available pursuant to this section and section 12-  
830 743.

831 Sec. 524. Subsection (b) of section 19a-323 of the 2008 supplement to  
832 the general statutes is repealed and the following is substituted in lieu  
833 thereof (*Effective October 1, 2008*):

834 (b) If death occurred in this state, the death certificate required by  
835 law shall be filed with the registrar of vital statistics for the town in  
836 which such person died, if known, or, if not known, for the town in  
837 which the body was found. The Chief Medical Examiner, Deputy Chief  
838 Medical Examiner, associate medical examiner, or an authorized  
839 assistant medical examiner shall complete the cremation certificate,  
840 stating that such medical examiner has made inquiry into the cause  
841 and manner of death and is of the opinion that no further examination  
842 or judicial inquiry is necessary. The cremation certificate shall be  
843 submitted to the registrar of vital statistics of the town in which such  
844 person died, if known, or, if not known, of the town in which the body  
845 was found, or with the registrar of vital statistics of the town in which  
846 the funeral director having charge of the body is located. Upon receipt  
847 of the cremation certificate, the registrar shall authorize the cremation  
848 certificate, keep it on permanent record, and issue a cremation permit,  
849 except that if the cremation certificate is submitted to the registrar of  
850 the town where the funeral director is located, such certificate shall be  
851 forwarded to the registrar of the town where the person died to be  
852 kept on permanent record. The estate of the deceased person, if any,  
853 shall pay the sum of forty dollars for the issuance of the cremation  
854 certificate or an amount equivalent to the compensation then being  
855 paid by the state to authorized assistant medical examiners, if greater,  
856 provided, the Office of the Chief Medical Examiner shall not assess any  
857 fees for costs that are associated with the cremation of a stillborn fetus.  
858 No cremation certificate shall be required for a permit to cremate the  
859 remains of bodies pursuant to section 19a-270a. When the cremation  
860 certificate is submitted to a town other than that where the person  
861 died, the registrar of vital statistics for such other town shall ascertain

862 from the original removal, transit and burial permit that the certificates  
863 required by the state statutes have been received and recorded, that  
864 the body has been prepared in accordance with the Public Health Code  
865 and that the entry regarding the place of disposal is correct. Whenever  
866 the registrar finds that the place of disposal is incorrect, the registrar  
867 shall issue a corrected removal, transit and burial permit and, after  
868 inscribing and recording the original permit in the manner prescribed  
869 for sextons' reports under section 7-72, shall then immediately give  
870 written notice to the registrar for the town where the death occurred of  
871 the change in place of disposal stating the name and place of the  
872 crematory and the date of cremation. Such written notice shall be  
873 sufficient authorization to correct these items on the original certificate  
874 of death. The fee for a cremation permit shall be three dollars and for  
875 the written notice one dollar. The Department of Public Health shall  
876 provide forms for cremation permits, which shall not be the same as  
877 for regular burial permits and shall include space to record  
878 information about the intended manner of disposition of the cremated  
879 remains, and such blanks and books as may be required by the  
880 registrars.

881 Sec. 525. Section 19a-26 of the 2008 supplement to the general  
882 statutes is repealed and the following is substituted in lieu thereof  
883 (*Effective July 1, 2008*):

884 The Department of Public Health may establish, maintain and  
885 control state laboratories to perform examinations of supposed morbid  
886 tissues, other laboratory tests for the diagnosis and control of  
887 preventable diseases, and laboratory work in the field of sanitation,  
888 environmental and occupational testing and research studies for the  
889 protection and preservation of the public health. Such laboratory  
890 services shall be performed upon the application of licensed  
891 physicians, other laboratories, licensed dentists, licensed podiatrists,  
892 local directors of health, public utilities or state departments or  
893 institutions, subject to regulations prescribed by the Commissioner of  
894 Public Health, and upon payment of any applicable fee as provided in  
895 this section. For such purposes the department may provide necessary

896 buildings and apparatus, employ, subject to the provisions of chapter  
897 67, administrative and scientific personnel and assistants and do all  
898 things necessary for the conduct of such laboratories. The  
899 Commissioner of Public Health may establish a schedule of fees,  
900 provided the commissioner waives the fees for local directors of health  
901 and local law enforcement agencies. If the commissioner establishes a  
902 schedule of fees, the commissioner may waive (1) the fees, in full or in  
903 part, for others if the commissioner determines that the public health  
904 requires a waiver, and (2) fees for chlamydia and gonorrhea testing for  
905 nonprofit organizations and institutions of higher education if the  
906 organization or institution provides combination chlamydia and  
907 gonorrhea test kits. The commissioner shall also establish a fair  
908 handling fee which a client of a state laboratory may charge a person  
909 or third party payer for arranging for the services of the laboratory.  
910 Such client shall not charge an amount in excess of such handling fee.

911 Sec. 526. (NEW) (*Effective July 1, 2008*) On or before September 1,  
912 2008, the Department of Public Health, in collaboration with the  
913 Department of Education, shall contact each local and regional board  
914 of education to make such boards aware of information concerning  
915 meningococcal meningitis. Such information shall include, but not  
916 necessarily be limited to, information related to the causes, symptoms  
917 and spread of meningococcal meningitis and vaccination information  
918 that reflects the current recommendations from the United States  
919 Center for Disease Control and Protection. On and after September 1,  
920 2008, the department shall periodically update the information  
921 provided to such boards concerning meningococcal meningitis.

922 Sec. 527. Subdivision (2) of subsection (c) of section 19a-127l of the  
923 general statutes is repealed and the following is substituted in lieu  
924 thereof (*Effective July 1, 2008*):

925 (2) Said committee shall create a standing subcommittee on best  
926 practices. The subcommittee shall (A) advise the department on  
927 effective methods for sharing with providers the quality improvement  
928 information learned from the department's review of reports and

929 corrective action plans, including quality improvement practices,  
930 patient safety issues and preventative strategies, (B) not later than  
931 January 1, 2006, review and make recommendations concerning best  
932 practices with respect to when breast cancer screening should be  
933 conducted using comprehensive ultrasound screening or mammogram  
934 examinations, and (C) not later than January 1, 2008, study and make  
935 recommendations to the department concerning best practices with  
936 respect to communications between a patient's primary care provider  
937 and other providers involved in a patient's care, including hospitalists  
938 and specialists. The department shall, at least [quarterly] semiannually,  
939 disseminate information regarding quality improvement practices,  
940 patient safety issues and preventative strategies to the subcommittee  
941 and hospitals.

942 Sec. 528. (NEW) (*Effective from passage*) (a) The Department of Public  
943 Health shall, when conducting its annual survey of a nursing home  
944 that has admitted a resident or residents who have been administered  
945 a level two assessment, shall compare the services recommended for  
946 any such resident in the level two assessment with the actual services  
947 being provided to such resident as reflected in such resident's plan of  
948 care. The department shall include the results of any such comparison,  
949 as well as any regulatory violations found by the department during  
950 an inspection, in the survey of such nursing home.

951 (b) A nursing home administrator, or a designee of the nursing  
952 home administrator, shall notify the Department of Mental Health and  
953 Addiction Services not later than fourteen days after the date of  
954 admission of any individual who has been administered a level two  
955 assessment which confirms a psychiatric diagnosis. Within available  
956 appropriations, the department shall consult with the staff of a nursing  
957 home concerning the status and discharge of those individuals who are  
958 clients of the department. The department shall, within available  
959 appropriations, protect to the fullest extent possible, the existing  
960 housing of any client of the department, who is identified in a level  
961 two assessment as being in need of a short-term admission to a nursing  
962 home of ninety days or less.

963       Sec. 529. (*Effective from passage*) Notwithstanding the provisions of  
964       section 19a-80 of the 2008 supplement to the general statutes, for the  
965       period of time commencing with the effective date of this section to  
966       June 30, 2009, inclusive, Solar Youth, Inc., a New Haven based  
967       nonprofit youth development and environmental education  
968       organization, shall be exempt from the licensure requirements  
969       prescribed in said section.

970       Sec. 530. (*Effective from passage*) For the period of time commencing  
971       with the effective date of this section to June 30, 2009, the  
972       Commissioner of Public Health may enter into agreements with out-of-  
973       state governmental agencies regarding training for asbestos and lead  
974       abatement practitioners and consultants. Such agreements shall  
975       establish criteria whereby training that has been approved by out-of-  
976       state governmental agencies shall satisfy Department of Public Health  
977       licensing and certification training requirements as relate to asbestos  
978       and lead abatement practitioners and consultants."